PART B - FEE(S) TRANSMITTAL

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or being facsimile transmitted to the USPTO, on the date indicated FISH & RICHARDSON P.C. P.O. Box 1022 below. Minneapolis, MN 55440-1022 (Denositor's name) (Signature) (Date) APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRM ATION NO 09/854,120 05/10/2001 Voshibaru Hirakata 07977-0275001 7409 TITLE OF INVENTION: METHOD OF MANUFACTURING LIQUID CRYSTAL DISPLAY DEVICE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional \$1510 \$300 \$1810 01/08/2009 FXAMINER ART UNIT CLASS-SUBCLASS POMPEY DON EVEDETT 2812 349-033000 Change of correspondence address or indication of "Fee Address" (37) 2. For printing on the patent front page, list (1) the CFR 1.363). I. Fish & Richardson P.C. names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent "Fee Address" indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY) Semiconductor Energy Laboratory Co., Ltd. Atsugi-Shi, Kanagawa-Ken, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): [X] Issue Fee A check in the amount of the fee(s) is enclosed. [X] Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies [X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) [].a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. I lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2) tered agent or, or the assignee or other party in interest as (Date) ___ (Authorized Signature) January 7, 2009 Typed or Printed Name Roberto J. Devoto Registration No. 55,108

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